Residential Supported-Living Services Conditions of Participation

Residential supported-living services may be provided for recipients who need assistance with the activities of daily living, but whose need for institutional level of care can be met through the support provided in a 24-hour residential supported-living setting. These services are provided in residential settings staffed 24 hours a day by on-site personnel who must be available to meet both scheduled and unpredictable recipient needs. The residential settings must provide a home-like environment where supervision, safety, and security are available for recipients, and social and recreational activities are provided in addition to the services necessary to prevent institutionalization.

The provider who chooses to offer residential supported-living services must be certified as a provider of residential supported-living services under 7 AAC 130.220 (b)(3), meet with the requirements of 7 AAC 130.255, and operate in compliance with the Provider Conditions of Participation and the following standards.

I. Program administration

A. Personnel.

- 1. Residential supported-living services program administrator.
 - a. The provider must designate a residential supported-living program administrator who is responsible for management of residential-supported living services and who may serve in dual capacity as the assisted living home administrator.
 - b. The provider may use a term other than program administrator for this position, e.g., program director, program manager, or program supervisor.
 - c. If the administrator's position in the provider's organizational structure is such that the administrator is not required to be qualified under 7 AAC 2.30 and does not manage the day-to-day operations of the home, the provider must designate an individual, who meets the qualifications in 7 AAC 75.230, to provide onsite management for a minimum of 20 hours a week that must be documented, and whose responsibilities include
 - i. orientation, training, and supervision of direct care workers;
 - ii. implementation of policies and procedures;
 - iii. intake processing and evaluation of new admissions;
 - iv. participation in the development of plan of cares in collaboration with care coordinators and other providers of services;
 - v. ongoing review of the delivery of services, including
 - (A) monitoring the amount, duration, and scope of services to assure delivery as outlined in the plan of care;
 - (B) assessing whether the services assist the recipients to attain the goals outlined in plan of cares; and
 - (C) evaluating the quality of care rendered by direct care workers;
 - vi. development and implementation of corrective action plans for identified problems or deficiencies; and
 - vii. submission of required reports to Senior and Disabilities Services, including critical incident reports.
 - d. If the residential-supported living program administrator is not an assisted-living home administrator who meets the qualification of 7 AAC 75.230, the person designated to be the residential supported-living program administrator must be at least 21 years of age, and qualified through experience and education in a human services field or setting.
 - i. Required experience:
 - (A) one year of full-time or equivalent part-time experience working with human services participants and their families, programs and grants administered by Senior and Disabilities Services, and providers of program and grant services; and

- (B) one year (which may be concurrent) of full-time or equivalent part-time experience, as a supervisor of two or more staff who worked full-time in a human services field or setting, in a position with responsibility for planning, development, and management or operation of programs involving service delivery, fiscal management, needs assessment, program evaluation and similar tasks.
- ii. Required education: high school or general education development (GED) diploma.
- e. In addition to meeting education and experience requirements, the administrator must possess the knowledge base and skills necessary to carry out the residential supported living services program.
 - i. The administrator knowledge base must include:
 - (A) the medical, behavioral, habilitative, and rehabilitative conditions and requirements of the population to be served; and
 - (B) the laws and policies related to Senior and Developmental Disabilities programs.
 - ii. The administrator skill set must include:
 - (A) the ability to evaluate, and to develop a service plan to meet, the needs of the population to be served;
 - (B) the ability to organize, evaluate, and present information orally and in writing; and
 - (C) the ability to supervise professional and residential supported living services staff.
- 2. Residential supported-living services direct care workers.
 - a. The provider must ensure that direct care workers meet the requirements of 7 AAC 75.240.
 - b. The provider must employ a number of direct care workers sufficient to allow time for
 - i. a daily routine of unhurried assistance with bathing, dressing, and eating at times that meets the needs of each recipient;
 - ii. assistance with mobility as needed;
 - iii. toileting and incontinence care to ensure comfort; and
 - iv. repositioning at a minimum of every two hours for recipients who require such assistance.

B. Training.

In addition to the training required under 7 AAC 75.240, the provider must provide training to direct care workers regarding

- 1. nutrition, hydration, and special diet needs of the recipient population;
- 2. risk factors and monitoring for skin integrity and urinary tract infections; and
- 3. fall prevention.

II. Program operations

A. Evaluation.

The provider must collaborate with the recipient's care coordinator to determine whether, given the recipient's diagnosis and needs, its direct care workers have the capacity to provide residential supported-living services for that recipient.

B. Recipient safety.

The provider must

- 1. maintain reasonable awareness of the schedule and location of recipients, who do not require supervision or an escort, when those recipients are absent from the assisted living home for the purposes of accessing services or engaging in activities in the community;
- 2. contact the recipient's representative or care coordinator when the provider is concerned about an emergent condition regarding the recipient's health, safety, or welfare while in the community; and
- 3. report as critical incidents all falls experienced by recipients, whether or not evaluation by or consultation with medical personnel was needed.

C. Recipient activities.

The provider must accord to recipients

- 1. a full range of activities ordinarily available in a home, including the opportunity to socialize, to exercise, to participate in household activities, and to be outdoors; and
- 2. opportunities for contact with family and friends, including visits in the home where residential supported living services are provided.